

1 PSR

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6 \_\_\_\_\_ MUNICIPAL COURT  
7  
8 CLARK COUNTY, NEVADA  
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9 In the Matter of the Application of )  
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11 )  
11 Social Security No.: XXX-XX- ) CASE NO.: \_\_\_\_\_  
12 LVMPD CS#: ) DEPT. NO.: \_\_\_\_\_  
12 ) DOCKET: \_\_\_\_\_  
13 )  
13 For an Order to Seal Records )  
14 \_\_\_\_\_ )

15 PETITION TO SEAL RECORDS

16 COMES NOW, \_\_\_\_\_, Petitioner, represented by  
17 \_\_\_\_\_, pursuant to the provisions of NRS 179.245 and/or  
18 179.255, and respectfully represents the following:  
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25 /////

1 That the Petitioner has been arrested as follows:

- 2 1. Date of Arrest: \_\_\_\_\_
- 3 Arresting Agency: \_\_\_\_\_
- 4 Charge: \_\_\_\_\_
- 5 Case Number: \_\_\_\_\_
- 6 Final Disposition: \_\_\_\_\_
- 7 2. Date of Arrest: \_\_\_\_\_
- 8 Arresting Agency: \_\_\_\_\_
- 9 Charge: \_\_\_\_\_
- 10 Case Number: \_\_\_\_\_
- 11 Final Disposition: \_\_\_\_\_
- 12 3. Date of Arrest: \_\_\_\_\_
- 13 Arresting Agency: \_\_\_\_\_
- 14 Charge: \_\_\_\_\_
- 15 Case Number: \_\_\_\_\_
- 16 Final Disposition: \_\_\_\_\_
- 17 4. Date of Arrest: \_\_\_\_\_
- 18 Arresting Agency: \_\_\_\_\_
- 19 Charge: \_\_\_\_\_
- 20 Case Number: \_\_\_\_\_
- 21 Final Disposition: \_\_\_\_\_
- 22 5. Date of Arrest: \_\_\_\_\_
- 23 Arresting Agency: \_\_\_\_\_
- 24 Charge: \_\_\_\_\_
- 25 Case Number: \_\_\_\_\_
- Final Disposition: \_\_\_\_\_

That the statutory time periods have fulfilled and that, in the period prescribed for any convictions, the Petitioner has not been arrested, except for minor moving or

standing traffic violations, and that further action will not be brought concerning any arrests resulting in dismissal or acquittal.

WHEREFORE, Petitioner waives a hearing in this matter and prays for an Order sealing all records listed above, which are presently in the custody of this Court, of another court in the State of Nevada, or of a public or private agency, company or official of the State of Nevada, including but not limited to:

1. Name of Agency \_\_\_\_\_  
Address \_\_\_\_\_  
City/State/Zip \_\_\_\_\_
2. Name of Agency \_\_\_\_\_  
Address \_\_\_\_\_  
City/State/Zip \_\_\_\_\_
3. Name of Agency \_\_\_\_\_  
Address \_\_\_\_\_  
City/State/Zip \_\_\_\_\_
4. Name of Agency \_\_\_\_\_  
Address \_\_\_\_\_  
City/State/Zip \_\_\_\_\_
5. Name of Agency \_\_\_\_\_  
Address \_\_\_\_\_  
City/State/Zip \_\_\_\_\_
6. Name of Agency \_\_\_\_\_  
Address \_\_\_\_\_  
City/State/Zip \_\_\_\_\_

DATED this \_\_\_\_ day of \_\_\_\_\_ 20\_\_.

\_\_\_\_\_

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6 \_\_\_\_\_ MUNICIPAL COURT

7 CLARK COUNTY, NEVADA

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9 In the Matter of the Application of )

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12 Social Security No.: XXX-XX-  
LVMPD CS#:

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16 For an Order to Seal Records )

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CASE NO.: \_\_\_\_\_

DEPT. NO.: \_\_\_\_\_

DOCKET: \_\_\_\_\_

19 DECLARATION

(NRS 15.010)

20 I, \_\_\_\_\_, declare:

21 I am the Petitioner in the above-entitled matter; I have read the foregoing Petition  
22 to Seal Records and know the contents thereof; that the same is true of my own  
23 knowledge except as to those matters therein stated on information and belief, and as to  
24 those matters I believe them to be true,

25 I declare under penalty of perjury under the law of the State of Nevada that the  
foregoing is true and correct.

Executed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ at Las Vegas, Nevada.

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6 \_\_\_\_\_ MUNICIPAL COURT  
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8 CLARK COUNTY, NEVADA  
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12 Social Security No.: XXX-XX- ) CASE NO.: \_\_\_\_\_  
13 LVMPD CS#: ) DEPT. NO.: \_\_\_\_\_  
14 ) DOCKET: \_\_\_\_\_  
15 For an Order to Seal Records )  
\_\_\_\_\_ )

16 ORDER TO SEAL RECORDS

17 Pursuant to the Petition of \_\_\_\_\_, Petitioner,  
18 represented by \_\_\_\_\_, and \_\_\_\_\_  
19 \_\_\_\_\_, City Attorney for the city of \_\_\_\_\_, Nevada, having  
20 stipulated below, the Court finding that the statutory requirements of NRS 179.245  
21 and/or 179.255 are satisfied, and good cause appearing, therefore;  
22

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**1** IT IS HEREBY ORDERED that the following records of arrest be sealed:

**2** 1. Date of Arrest: \_\_\_\_\_  
**3** Arresting Agency: \_\_\_\_\_  
**4** Charge: \_\_\_\_\_  
**5** Case Number: \_\_\_\_\_  
Final Disposition: \_\_\_\_\_

**6** 2. Date of Arrest: \_\_\_\_\_  
**7** Arresting Agency: \_\_\_\_\_  
**8** Charge: \_\_\_\_\_  
**9** Case Number: \_\_\_\_\_  
Final Disposition: \_\_\_\_\_

**10** 3. Date of Arrest: \_\_\_\_\_  
**11** Arresting Agency: \_\_\_\_\_  
**12** Charge: \_\_\_\_\_  
Case Number: \_\_\_\_\_  
Final Disposition: \_\_\_\_\_

**13** 4. Date of Arrest: \_\_\_\_\_  
**14** Arresting Agency: \_\_\_\_\_  
**15** Charge: \_\_\_\_\_  
**16** Case Number: \_\_\_\_\_  
Final Disposition: \_\_\_\_\_

**17** 5. Date of Arrest: \_\_\_\_\_  
**18** Arresting Agency: \_\_\_\_\_  
**19** Charge: \_\_\_\_\_  
Case Number: \_\_\_\_\_  
Final Disposition: \_\_\_\_\_

**20** 6. Date of Arrest: \_\_\_\_\_  
**21** Arresting Agency: \_\_\_\_\_  
**22** Charge: \_\_\_\_\_  
Case Number: \_\_\_\_\_  
Final Disposition: \_\_\_\_\_

**24** /////

**25** /////

**1** IT IS FURTHER ORDERED that the person to whom this order pertains is  
**2** immediately restored to the following civil rights if their civil rights previously have not  
**3** been restored: (1) The right to vote; (2) The right to hold office; and (3) The right to serve  
**4** on a jury.  
**5**

**6** A copy of this Order shall be sent by Petitioner to each public or private agency,  
**7** company or official of the State of Nevada, as named in the Petition, including but not  
**8** limited to:  
**9**

- 10** 1. Name of Agency \_\_\_\_\_  
Address \_\_\_\_\_  
City/State/Zip \_\_\_\_\_  
**11**
- 12** 2. Name of Agency \_\_\_\_\_  
Address \_\_\_\_\_  
City/State/Zip \_\_\_\_\_  
**13**
- 14** 3. Name of Agency \_\_\_\_\_  
Address \_\_\_\_\_  
City/State/Zip \_\_\_\_\_  
**15**
- 16** 4. Name of Agency \_\_\_\_\_  
Address \_\_\_\_\_  
City/State/Zip \_\_\_\_\_  
**17**
- 18** 5. Name of Agency \_\_\_\_\_  
Address \_\_\_\_\_  
City/State/Zip \_\_\_\_\_  
**19**
- 20** 6. Name of Agency \_\_\_\_\_  
Address \_\_\_\_\_  
City/State/Zip \_\_\_\_\_  
**21**
- 22** 7. Name of Agency \_\_\_\_\_  
Address \_\_\_\_\_  
City/State/Zip \_\_\_\_\_  
**23**

**24** /////

**25** /////

1 Such organization or individual shall seal the records in its custody which relate to the  
2 matters contained in this Order, shall advise the Court of its compliance and shall  
3 then seal the Order.

4 All proceedings recounted in the sealed records are deemed never to have  
5 occurred, and Petitioner may properly answer accordingly to any inquiry concerning the  
6 sealed arrest, conviction, or acquittal.

7 DATED this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_.  
8  
9

10 \_\_\_\_\_  
11 MUNICIPAL COURT JUDGE

12 Submitted by:  
13  
14 \_\_\_\_\_

15 The City Attorney has reviewed the applicable criminal history and agrees that the  
16 record is statutorily eligible for sealing. The Petition and Order have not been reviewed  
17 for completeness or accuracy. The decision to order the sealing of a record remains solely  
18 within the discretion of the Court. See NRS 179, et seq.  
19

20 \_\_\_\_\_  
21 City Attorney, \_\_\_\_\_, Nevada

22 \_\_\_\_\_  
23 CITY ATTORNEY

24 State Bar No.: \_\_\_\_\_  
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12 Social Security No.: XXX-XX- )  
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15 )

16 NOTICE OF ENTRY OF ORDER TO SEAL RECORDS

17 YOU WILL PLEASE TAKE NOTICE that on the \_\_\_\_\_ day of \_\_\_\_\_,  
18 20\_\_\_\_\_, the above-entitled Court entered an Order to Seal Records in the above-entitled  
19 action. A true copy of the Order to Seal Records is attached hereto.

20 DATED this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_.

**CERTIFICATE OF MAILING**

I hereby certify that on the \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, I served a true copy of the foregoing **Notice of Entry of Order to Seal Records** by placing the same into a sealed envelope, affixing first class postage thereto, and depositing said envelope in the U.S. Mail, addressed as follows:

1. Name of Agency \_\_\_\_\_  
Address \_\_\_\_\_  
City/State/Zip \_\_\_\_\_
2. Name of Agency \_\_\_\_\_  
Address \_\_\_\_\_  
City/State/Zip \_\_\_\_\_
3. Name of Agency \_\_\_\_\_  
Address \_\_\_\_\_  
City/State/Zip \_\_\_\_\_
4. Name of Agency \_\_\_\_\_  
Address \_\_\_\_\_  
City/State/Zip \_\_\_\_\_
5. Name of Agency \_\_\_\_\_  
Address \_\_\_\_\_  
City/State/Zip \_\_\_\_\_
6. Name of Agency \_\_\_\_\_  
Address \_\_\_\_\_  
City/State/Zip \_\_\_\_\_

\_\_\_\_\_